



Facility Use - Supplemental Form South Bellevue Community Center

The following information will help staff better understand your event.

1. Indicate how you will use the space (mark all that apply):

- Meeting Class Reception Party Adults only Adults & Youth
 Other (specify): _____

2. Will you be serving food? Yes No

If yes, who is providing? Group member Caterer-delivered Caterer-prepared/served*

*If you are hiring a catering company to prepare/serve food on site an [Indoor Facility Special Use Form](#) is required. See [Facility Rental Guidelines](#) for all requirements.

3. Will you be serving alcohol? Yes** No Will you be selling alcohol? Yes** No

**If yes, a Banquet Permit or Special Occasion License and server with a Class 12 Permit are required. See [Facility Rental Guidelines](#) for all requirements that must be met for approval. Alcohol service must be approved a minimum of 5 business days' prior to event date. Alcohol service is not be approved during business hours.

4. Will there be music? Yes No

If yes, who is providing? Stereo DJ Live (which instruments?) _____

5. Will you be collecting admissions? Yes No Estimated Amount: \$ _____

6. Will you be selling concessions? Yes No Vendor Name: _____

7. Are you hiring an event or equipment company to provide a Big Toy/Inflatable? Yes No

If yes, name of rental agency: _____

Note: Special regulations must be followed in order to bring an inflatable into the building.

8. Indicate the facility you want to reserve and the time requested (mark all that apply):

- Gym A _____ Community Room A _____ Classroom 1 _____
 Gym B _____ Community Room B _____ Classroom 2 _____
 Community Room A & B (required for weekend rentals) _____
 Climbing Wall _____ Challenge Course _____
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EQUIPMENT

9. Describe any equipment you intend to bring with you to use: _____

10. On-site equipment to be used (mark all that apply): LCD Projector

Basketball (Gym) Volleyball (Gym) Badminton/Pickleball (Gym)

11. Indicate the number of chairs & tables needed: _____ Vinyl stackable chairs (150 avail.)
_____ 6 ft long tables (20 avail.) _____ 5 ft round tables (16 avail.) _____ card tables (6 avail.)

12. Kitchen equipment needed (mark all that apply):

Microwave Oven/Burners Refrigerator Dishwasher

13. Will you be utilizing our linen service? Yes No If yes, please fill out a [Linen Order Form](#).

CONTACT INFORMATION

South Bellevue Community Center:
14509 SE Newport Way, Bellevue, WA 98006
Phone: 425-452-4240
Fax: 425-452-7912
Email: SBCC@bellevuewa.gov

After Hours Emergencies:
Bellevue Parks Resource Management
Phone: 425-452-6855

FOR OFFICE USE ONLY: Barcode: _____ Rental #: _____

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